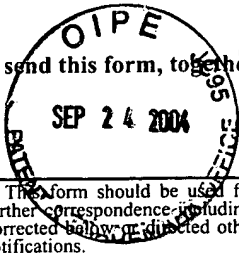


PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

000201 7590 07/30/2004

UNILEVER
 PATENT DEPARTMENT
 45 RIVER ROAD
 EDGEWATER, NJ 07020

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

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Dixie E. Cruz-Aleman

(Depositor's name)

(Signature)

9/21/04

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/712,478	11/13/2003	John Brian Bartolone	J6868(C)	8322

TITLE OF INVENTION: ELECTROCHEMICAL METHOD AND SYSTEM FOR DYEING HAIR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	11/01/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ELHILO, EISA B	1751	008-401000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Michael P. Aronson

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Unilever Home & Personal Care USA,
 Division of Conopco, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Chicago, Illinois

09/27/2004 FFANAI3 00000053 121155 10712478
 01 FC:1501 1330.00 DA
 02 FC:1504 300.00 DA
 03 FC:8001 30.00 DA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-1155 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

(Authorized Signature)

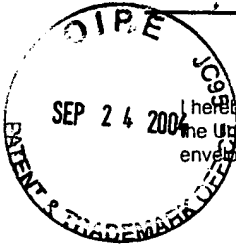
(Date)

September 21, 2004

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)



CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to:

"Assistant Commissioner for Patents
Alexandria, VA 22313-1450"

On September 21, 2004

MICHAEL P. ARONSON
Reg. No.: 50,372
Agent for Applicant(s)

09/ 21 /04
Date of Signature

PATENT

UNUS NO.: 03-R390-EDG

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Customer No.: 000201
Attorney Docket No.: J6868(C)
Applicant: Bartolone et al.
Serial No.: 10/712,478
Filed: November 13, 2003
For: ELECTROCHEMICAL METHOD AND SYSTEM FOR DYEING HAIR

Group: 1751
Examiner: E. B. ELHILO
Edgewater, New Jersey 07020
September 21, 2004

ISSUE FEE TRANSMITTAL

Assistant Commissioner for Patents
Alexandria, VA 22313-1450

Sir:

With regard to the above-identified patent application, Applicants(s) are enclosing herewith Issue Fee Transmittal Form PTOL-85(b)(in duplicate). Fifteen (10) soft copies of the printed patent are hereby requested.

Please deduct the \$1330.00 Issue Fee Payment; \$300.00 Publication Fee, and \$30.00 for 10 soft copies of the printed patent from Deposit Account No. 12-1155. Any deficiency or overpayment should be charged or credited to this Deposit Account. This authorization is submitted in triplicate.

Respectfully submitted,

Michael P. Aronson
Registration No. 50,372
Agent for Applicant(s)

MPA/dca
(201) 840-2412